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APPLICANTS

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 14	TOTAL CLAIMS 47 ✓	INDEPENDENT CLAIMS <i>5 4</i>
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>11/26/04</i>				
Verified and Acknowledged	<i>SCE</i> Examiner's Signature	Initials			

ADDRESS

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TITLE

Automated repetitive array microstructure defect inspection

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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